HAMILTON THE SPECTATOR

This copy is for your personal non-commercial use only. To order presentation-ready copies of Toronto Star content for distribution to colleagues, clients or customers, or inquire about permissions/licensing, please go to: www.TorontoStarReprints.com

CONTRIBUTORS OPINION

Moral distress: Let's take this time to help the helpers during Nurses Week

By **Sharon Kaasalainen**

Fri., May 15, 2020 | 3 min. read

The COVID-19 pandemic is revealing some truly disturbing facts about life in long-term care — not just for the residents, but for the understaffed, poorly paid front-line workers who care for them. Lessons learned from COVID-19 should be much broader than funding, standards of care and infection control; it's time for us to think about those who are and will suffer much longer-term consequences of this pandemic, both physically and psychologically.

Based on current data from three Canadian health regions, it's a sad fact that in 18 months when we have a vaccine, the majority of long-term-care residents would have died naturally without COVID as they are in fragile health.

The real tragedy is not so much the number of deaths, but rather the quality of their deaths and its impact on families and staff. Separated from their loved ones and unable to be comforted at the end, their final moments are spent alone, often confused by their isolation.

These are terrible situations for family members who feel enormous grief and guilt. However, it's equally distressing for the staff who care for residents, and who, because of understaffing and restrictions, cannot support families through a good death. In some ways, their suffering is greater — family members must endure the tragic loss of one person; long-term-care workers are in some cases reliving this horrible experience multiple times a day. This compounded loss and grief can be unbearable knowing that residents deserved a better death.

Moral distress is an emotional state that occurs when someone feels that an action they are tasked with doing is ethically opposite to what they feel is the right thing to do. In the case of long-term-care workers — nurses, physicians, personal support workers or care aides and others — leaving someone to die alone and confused is completely antithetical to their beliefs and training.

In a long-term-care setting, the psychosocial and spiritual sides of health care are often more important that medication or other treatments. Nurses and personal support workers, for example, work intimately with residents, and often form deep and caring relationships with them.

Residents often rely on them for emotional support, sometimes more than they expect from their own families. And for some residents, nurses and personal supports workers are the only 'family' they have, and with family visiting restrictions due to COVID-19, this is even more prevalent. That's why it's so distressing for them to see so many residents dying alone or in distress during COVID-19.

In our research, it is clear that nurses and personal support workers need more training and support to help them care for dying residents and this is even more critical during COVID-19. But it is just as important that they learn how to navigate their way through the moral distress as a result of the many difficult resident deaths they've experienced.

How can we help the helpers? Funding is definitely one answer. Long-term-care workers are the lowest paid according to their discipline, which explains why we have a shortage of geriatricians and long-term-care nurses and personal support workers in

Canada.

Restructuring of LTC homes has been on the agenda for the government for over a decade now with plans to remove any four-bed rooms to a more 'infection-control friendly' environment. But other issues always seem to take priority, and long-term-care improvements end up at the bottom of the list.

These are important action items. But we need to look beyond numbers and infection control standards. It's time for us to understand and respect the psychological and physical toll that our front-line workers experience on the job, and recognize that we need a strategy to help them help our most vulnerable population.

By 2030, seniors will number over 9.5 million and make up 23 per cent of Canadians. A recent Conference Board of Canada study estimated that Canada must nearly double the number of long-term-care beds by 2035. Given these numbers, it's clear that we will need appropriately trained and supported staff for our elderly. But who will want to work in an underfunded, unrespected system?

Let's take this moment of crisis during Nurses Week to get at the root of the problem. It's time to help our helpers, and give them the support and respect they deserve.

Sharon Kaasalainen is a professor in the School of Nursing at McMaster University

YOU MIGHT BE INTERESTED IN...

LOCAL : NEWS

COVID-19 outbreak in Burlington worsens with big spike in new infections

8 hrs ago

UNITED STATES

Firefighter’s daughter, 7, found in Florida condo rubble

1 day ago

GTA

Slain Toronto police officer remembered as 'an absolute gentleman with a heart of gold'

1 day ago

HAMILTON REGION

'Callous and arrogant': Rosslyn Retirement Residence facing $30M class action lawsuit

Jan. 07, 2021

More from The Spec & Partners

Copyright owned or licensed by Toronto Star Newspapers Limited. All rights reserved. Republication or distribution of this content is expressly prohibited without the prior written consent of Toronto Star Newspapers Limited and/or its licensors. To order copies of Toronto Star articles, please go to: www.TorontoStarReprints.com